POPULATION

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UNFPA takes stock of financial requirements

MEETING ALL POPULATION assistance requirements would take more than twice UNFPA's current operating budget, according to Executive Director Nafis Sadik.

"The Fund is operating at the level of approximately US$ 210 million a year," Dr. Sadik said at the 1-2 November United Nations Pledging Conference for Development Activities held in New York. Current assessments suggest that meeting countries' needs for the types of support provided by the Fund would cost about US$ 500 million, she said.

Government contributions for UNFPA activities in 1991 will yield a projected 10.5-11 per cent raise over financial contributions for 1990. UNFPA assistance programmes depend almost entirely on governments' voluntary contributions.

At the Conference, 60 countries announced contributions to the general resources of UNFPA for 1991, totalling US$ 87.0 million. Based on these pledges, and taking into account estimated contributions still to come, the Fund estimates contributions for 1991 will amount to about US$ 227 million. Adding miscellaneous income, this will boost the level of operations to about US$ 235 million.

Eighteen countries increased their contributions by 10 per cent or more. These were: Albania, Australia, Czechoslovakia, Fiji, Finland, Hungary, Indonesia, Lao People's Democratic Republic, Luxembourg, Malawi, Niger, Poland, Romania, Spain, the Soviet Union, Switzerland, Tunisia, and Viet Nam.

Several of UNFPA's major supporters, notably Canada, Denmark, France, Germany, Italy, Japan, Norway, and the United Kingdom, were unable to announce pledges at the conference because of their budget procedures. The Government of Sweden, while guaranteeing at least the same amount as for 1990, also expects to finalize its budget later.

UNFPA's principal goal is to assist countries to formulate a national policy framework as part of the national development plan. A key element of UNFPA co-operation is the Programme Review and Strategy Development (PRSD) exercise. PRSD missions take stock of current activities and assess the needs for future action to meet governments' population policy goals.

Dr. Sadik noted that the "actual financial needs to stem the population tide"—US$ 9 billion annually from all sources by the year 2000—were articulated in November 1989 by the International Forum on Population in the Twenty-First Century, held in Amsterdam. This compares with the US$ 4.5 billion currently spent on all population activities worldwide by governments, international organizations, and others.

At its 1990 session, the UNFPA Governing Council urged that every effort be made to reach the US$ 9 billion target by the year 2000. This figure represents the costs of providing a comprehensive programme made up of family planning services, demographic research and analysis, policy development, and communication. □

Peru sets out to meet its "unmet need"

AN INITIATIVE recently unveiled by the Peruvian Government sets out to ensure that family planning services are available to all women who want them.

The new plan reinforces Peru's existing population policy by calling for free access to family planning information and the distribution of contraceptives through all public health facilities.

UNFPA Country Director Einar Sandved said the plan's announcement by President Alberto Fujimori reaffirmed commitment to family planning programmes at the highest level.

Some 80 per cent of Peruvian women of reproductive age want to practice family planning, according to the National Institute of Statistics. But only about 50 per cent are using a method of contraception—fewer still, a modern contraceptive. The gap between intended and actual contraceptive use is called "unmet need" in the family planning vernacular.

Peru's crude birth rate—31 births per thousand people, according to United Nations estimates—is one of the four highest in South America. The plan's stated goal is to reduce the country's annual number of births from the current 650,000 to fewer than 300,000 by the year 2000.

The Pan American Health Organization (PAHO) and UNFPA will collaborate closely with the Government in implementing the initiative, Health Minister Carlos Vidal Layseca said. The two organizations are co-operating in women's health and family planning projects under a UNFPA-supported country programme.

UN/A Aranow

A Peruvian woman weaving a poncho *at the entrance to her home.*

These include community provision of integrated family planning and oral rehydration services, and improving maternal and child health/family planning services in Peru's least-served geographic areas.

In Peru as elsewhere, family planning activities have traditionally met resistance from men who refuse to permit "their" women to use contraceptive methods. Juan Pecho, a mining leader, said his attempts to promote family planning failed because men began to mistrust their wives, who, they complained, had become "grouchy."

According to the Peruvian Women's Centre *Flora Tristan*, high cost also accounts for low contraceptive prevalence. An intra uterine device currently costs about US$ 17, and the pill is also considered too expensive for most purses. (IPS) □

European conference seeks to reduce abortion

"CONTRACEPTION REDUCES abortion," according to a declaration issued at the 10-13 October international conference on reproductive health in Europe.

The Tbilisi Declaration, named after the city where the conference was held in the Georgian Soviet Socialist Republic, states: "In Europe, as in the rest of the world, unwanted pregnancy and unsafe abortion are major public health and social problems.... Ten million or more abortions are induced in Europe each year. Abortion rates are up to 20 times higher in those countries where family planning and sexuality education are weakest and where greatest constraints on the autonomy of women exist."

The conference, "From Abortion to Contraception," sought ways to lower the number of abortions performed each year in Europe. It was co-sponsored by the World Health Organization's (WHO) Regional Office for Europe, the International Planned Parenthood Federation (IPPF), UNFPA, and the Zhordania Institute, which played host.

In a Call To Action, the 300 conference participants emphasized the need for:

- "high quality comprehensive reproductive health services provided in a way that respects women's autonomy and dignity";
- "education from an early age and for both sexes on sexuality and interpersonal relationships";
- "changes in lifestyle promoting reproductive health which will, among other things, encourage men to share equal responsibility in contraception, family formation and child rearing"; and
- "increased government funding for services and training for reproductive health care, counselling, and educational programmes."

Conference participants also drew up a list of specific recommendations covering reproductive health services, professional training, education and information, laws and policies, and specific tasks to be considered by WHO, IPPF, UNFPA, and governments.

"Reproductive health is a central issue, firstly because it keeps to determine the demographic future, and secondly because it concerns one of the basic human rights of the female half of the population," UNFPA Executive Director Nafis Sadik said in her keynote address.

Dr. Sadik added that "UNFPA does not support abortion as a means of family planning."

The conference document had this to say about the impact of abortion legislation: "Comparisons between European countries strongly suggest that criminalization has little impact on the incidence of abortion or the birth rate over the longer term. It is, however, associated with unsafe procedures causing death and physical and psychological harm, including infertility."

For more information, contact: Daniel Pierotti, Chief, Sexuality and Family Planning, Regional Office for Europe, World Health Organization, 8 Scherfigsvej, 2100 Copenhagen, Denmark. □

Africa viewed as preoccupied with crises

"TODAY, VIRTUALLY ALL African governments are almost entirely preoccupied with crisis management," according to Salim Ahmed Salim, Secretary-General of the Organization of African Unity (OAU). The continent's situation leaves its governments "with no option but to pursue population policies," he said.

The former President of the United Nations General Assembly and Prime Minister of Tanzania gave the 1990 Paul Hoffman Lecture on 4 October. The annual lecture is named after the UN Development Programme's first Administrator.

Despite the efforts of the OAU and individual countries, Africa—home to 28 of the 41 least developed countries—"has remained the poorest and the least developed continent in the world," Dr. Salim told his international audience in New York.

He blamed Africa's ailments on the ravages of colonialism, drought and external debt intensified by fluctuating commodity prices and the fastest population growth rate in the world.

"This rapid population growth poses serious socio-economic problems, especially on the need to produce enough food for an estimated additional 15 to 20 million people annually, at a time when Africa is struggling to feed itself," Dr. Salim said. "Africa also faces the challenge of how to create 200 million additional jobs, about 10 million annually between 1990 and the year 2000, when presently millions of able people are unemployed and millions more are underemployed."

He explained: "These problems leave Africa with no option but to pursue population policies which ensure a balance between population growth and socio-economic development. Indeed, the need to integrate the population variable in the formulation of national development policies and programmes has never been greater."

Urging "the support and encouragement of the international community" for Africa's development efforts, Dr. Salim concluded: "There is no doubt that Africa has encountered and continues to face harsh and formidable political, social and economic difficulties. These are development problems. But development in Africa cannot be measured by statistical indicators alone. For, behind these statistics are people whose initiatives, resourcefulness, dignity and hope cannot be quantified." □

FAO/Maya Bracher

Drying millet seeds in Senegal. Africa is having to "produce enough food for an estimated additional 15 to 20 million people annually," says Organization of African Unity Secretary-General Salim Ahmed Salim.

World AIDS Day—1 December 1990

Family planning's role in the fight against AIDS

by James Chui

WITH THE WORLD Health Organization (WHO) estimating in August that as many as 10 million people worldwide might be infected with the AIDS-causing Human Immunodeficiency Virus (HIV), AIDS (Acquired Immune Deficiency Syndrome) is no longer just a health issue. It is a development issue, with significant social, economic, and demographic implications.

WHO's latest reports show the epidemic continually worsening in sub-Saharan Africa, and a recent surge in Asia. These regions house an estimated seven-tenths of global population. In Africa alone, experts project 10 million AIDS orphans by the year 2000. Who will take care of them? While AIDS spreads through the sub-Saharan countryside, the disease is hitting Africa's urban populations hardest, threatening work-forces and educated elites.

WHO also predicts that at least 3 million women and children will die of AIDS in the 1990s. About half the worldwide infected population is younger than 25, and the virus has shown up in newborns as a result of transmission through the placenta.

Some 3 million women might currently be HIV-infected. AIDS is now the leading cause of death in women aged 20-40 years in New York and in other major cities in the Americas, sub-Saharan Africa, and Europe. These grim statistics account for the special attention being given to women in this year's observance of World AIDS Day.

As surely as AIDS is no longer the homosexual affliction it is still erroneously portrayed as in some places, the disease is profoundly connected with maternal and child health and family planning programmes.

At the service-delivery level, AIDS has improved the climate for condoms: they are now seen as more than just a contraceptive, as something that can help prevent AIDS. But the pandemic underscores the importance of more fundamental themes in family planning programmes.

For example, the low status accorded women in many societies and families makes them particularly vulnerable to infection. Also, deep-rooted cultural misgivings and misinformation make for fear and discrimination. Thus, misconceptions that AIDS can be spread by shaking hands or from door knobs persist alongside the self-denial that "it can't happen to me."

Concrete measures to incorporate AIDS components in existing projects and, where necessary, to design special activities under UNFPA's AIDS policy guidelines date back to 1987. The Fund is committed to addressing AIDS-related problems through its information, education, and communication (IEC) activities as well as in its maternal and child health/family planning (MCH/FP) programmes.

UNFPA Uganda Country Director Teferi Seyoum reports one example of such programming: the setting up of an AIDS prevention project alongside an existing MCH/FP project.

"All UNFPA-assisted IEC and MCH/FP projects in the Caribbean have an AIDS awareness component," Fund Caribbean Director Kanchi Moorthy adds.

UNFPA Thailand reports efforts are under way to develop a project designed specifically for high-risk groups, with the help of the Global Programme on AIDS.

Short of a cure for AIDS, the first line of defence is education. Many governments, United Nations and other international agencies, and non-governmental organizations are stepping up efforts to educate populations and to pinpoint specific areas where more, or more appropriate, support could be provided. The UN Educational, Scientific and Cultural Organization's (UNESCO) Health Promotion Materials Exchange Centre for Asia and the Pacific in Bangkok produces a resource kit for the mass media.

***Population** notes: AIDS kills by undermining the body's immunity to even the most mundane infections. For more information, contact: World Health Organization Global Programme on AIDS, CH-1211 Geneva 27, Switzerland.* □

Bangladesh council incentives promote smaller families

THE EXECUTIVE Committee of Bangladesh's National Council for Population Control has issued incentives to encourage family planning among Bangladesh's 100,000-plus civil servants, UNFPA Country Director S.K. Alok reports from Dhaka.

Under the incentive scheme, government servants with only one child will be entitled to a retirement lumpsum equal to 12 months' pay. State employees with two children will be entitled to six months' pay.

After 1992, overseas assignments and training will be reserved for civil servants with no more than two children.

To avoid unfair discrimination, the incentives will not be applied to older civil servants, who might not have had access to contraception during their reproductive years.

A system of tax rebates is also being introduced to reward parents—private citizens and civil servants alike—who have no more than two children. Families with one or two children will be eligible for tax rebates of 15 per cent and 10 per cent, respectively.

The incentives are among the revamped Council's first decisions, and were adopted by its Executive Committee in August.

The Council was established in the 1970s as a ministerial-level caucus. Earlier this year, it was reconstituted as a 400-member assembly of government and local leaders, civil servants, representatives of occupational groups, and other citizens. The President of Bangladesh chairs the Council as well as its Executive Committee. These changes were brought about after President Hussain Muhammad Ershad told parliament in January that the country needed a "social revolution" to address population issues.

UNFPA's fourth Bangladesh country programme covers the five-year period 1991-95. Under the programme, UNFPA is co-operating with the Government to strengthen the Council secretariat's capacity with technical assistance and information. The Fund is also providing technical support, policy research, and information to help implement the Council's decisions. □

Asian parliamentarians rally around one per cent population growth target

LAWMAKERS FROM 21 Asian countries have committed themselves to "making a direct and all-out attack on both poverty and rapid population growth."

The commitment takes the form of a declaration and programme of action adopted by the Third General Assembly of the Asian Forum of Parliamentarians on Population and Development, held in Bangkok, Thailand, on 15-18 October. It comes as the number of Asians, currently 3.1 billion, is expected to grow by 600 million in what is left of the century. Some 350 million of the new Asians will come from the continent's poorest countries.

The legislators reiterated their "strong resolve to help achieve an annual population growth rate of 1 per cent for the Asia region by the year 2000," a resolution made at the Asian Forum's second general assembly, held in 1987 in Beijing, China. Their action also responds to the need to spread "the message that economic development must not be bought at the cost of human development," in the words of UNFPA Executive Director Nafis Sadik.

"The surest way to achieve sustained decline in fertility," according to the Bangkok Declaration, "is to invest in social and human resource development, improve mother and child health, enhance the status and education of women and make family planning as widely available as possible to both men and women."

The parliamentarians' Programme of Action calls for a far-reaching reassessment of national legislation and policies, with a view to: reducing population growth; reducing maternal and child mortality; balancing population distribution and resources; safeguarding the environment; fully involving women in development; providing security for the aged; addressing the special needs of youth; and improving health care and extending family planning services.

Dr. Sadik outlined the population prospects in a region currently inhabited by six out of every ten humans. "In Asia, the population situation in many countries is very hopeful," she told the assembly. "There have been rapid and substantial declines in fertility in several countries, and in the region as a whole."

"But in most of South Asia growth continues to be rapid," Dr. Sadik added. "This is despite a declared determination on the part of most governments of the region to work towards slower and more balanced population growth. The region is expanding at an annual rate of 2.34 per cent, or nearly 28 million people a year. Its population will be nearly 1.5 billion by the end of the century and 2 billion by 2025. By that time the rate of growth will be much slower, but the weight of numbers will ensure that annual additions will decline only slowly in absolute terms. In round figures, we are talking about adding between 25 and 28 million people a year for the foreseeable future to one of the poorest areas in the world." □

Asia-Pacific environment ministers meet

ENVIRONMENT MINISTERS from 28 Asian and Pacific countries attended the region's first-ever environment ministers' conference in Bangkok on 10-16 October.

"All social and economic development activities should meet the needs of the present generation without compromising the ability of future generations to meet their own needs," the ministers said in a declaration issued at the end of the Conference.

The Asia-Pacific region is losing five million hectares of forest a year. Experts say skewed land distribution and a swelling population are the region's major environmental threats. The number of Asians has already surpassed the three billion mark, and will reach nearly five billion by 2025. The region already has the world's highest population densities.

Speaking at the Conference, UNFPA Executive Director Nafis Sadik urged that population and environmental concerns be placed on top of the development agenda, and underscored "the high priority that must be given to poverty alleviation."

The Conference was sponsored by the United Nations Economic and Social Council for Asia and the Pacific, the UN Environment Programme, and the Asian Development Bank. □

South Asia's girl children still face discrimination

by Rajiv Tiwari

AS THE YEAR of the Girl Child draws to a close, South Asia's little girls stand little chance of breaking out from centuries of sexism. Girls continue to be heavily disadvantaged at home, school, farm and work place.

Leaders from Bangladesh, Bhutan, India, the Maldives, Nepal, Pakistan and Sri Lanka, which together have a population of more than one billion people, decided two years ago to focus on girl children. The countries of the South Asia Association for Regional Cooperation named 1990 the "Year of the Girl Child."

The unique emphasis was intended to isolate the problems of girls from the larger issue of the backward status of women in South Asia.

Social scientists have recognized that the South Asian "girl child"—as opposed to the "boy child"—faces discrimination from the moment she is born.

Surveys show that girls get less to eat, have less access to schooling, are sick more often, get less medical attention, and do more housework than boys.

Whereas 52 per cent of all children were enrolled in primary school in Pakistan in 1987, only 35 per cent of girls were, according to the World Bank. Only one girl in ten made it to secondary school in Bhutan. Female enrollment figures, highest in Sri Lanka, were not available in Nepal—where 88 per cent of women are illiterate.

"There is quite clearly discrimination in feeding," said Shanti Ghosh, a South Asian expert on health issues. "During meal times sons had better access to milk, eggs and butter than daughters."

Ghosh said surveys showed boys were more readily taken to a doctor. Many parents willingly sink into debt in order to treat sons, but often will not do so if a daughter is sick.

Experts say the bias for boys and neglect of girls is most prevalent in Pakistan, India, Bangladesh and Nepal, where cultural prejudices are extreme.

But even in Sri Lanka, Bhutan and Maldives—where sexism is not as overt and statistics reflect a better status of women—the girl child is hampered by legal and social hurdles.

In most South Asian countries, the most dangerous periods for the survival of girl children are between the ages of one month and four years and the peak child-bearing ages, 15-35 years. South Asian girls are at greater risk than boys of dying before reaching the age of five except in India and Sri Lanka.

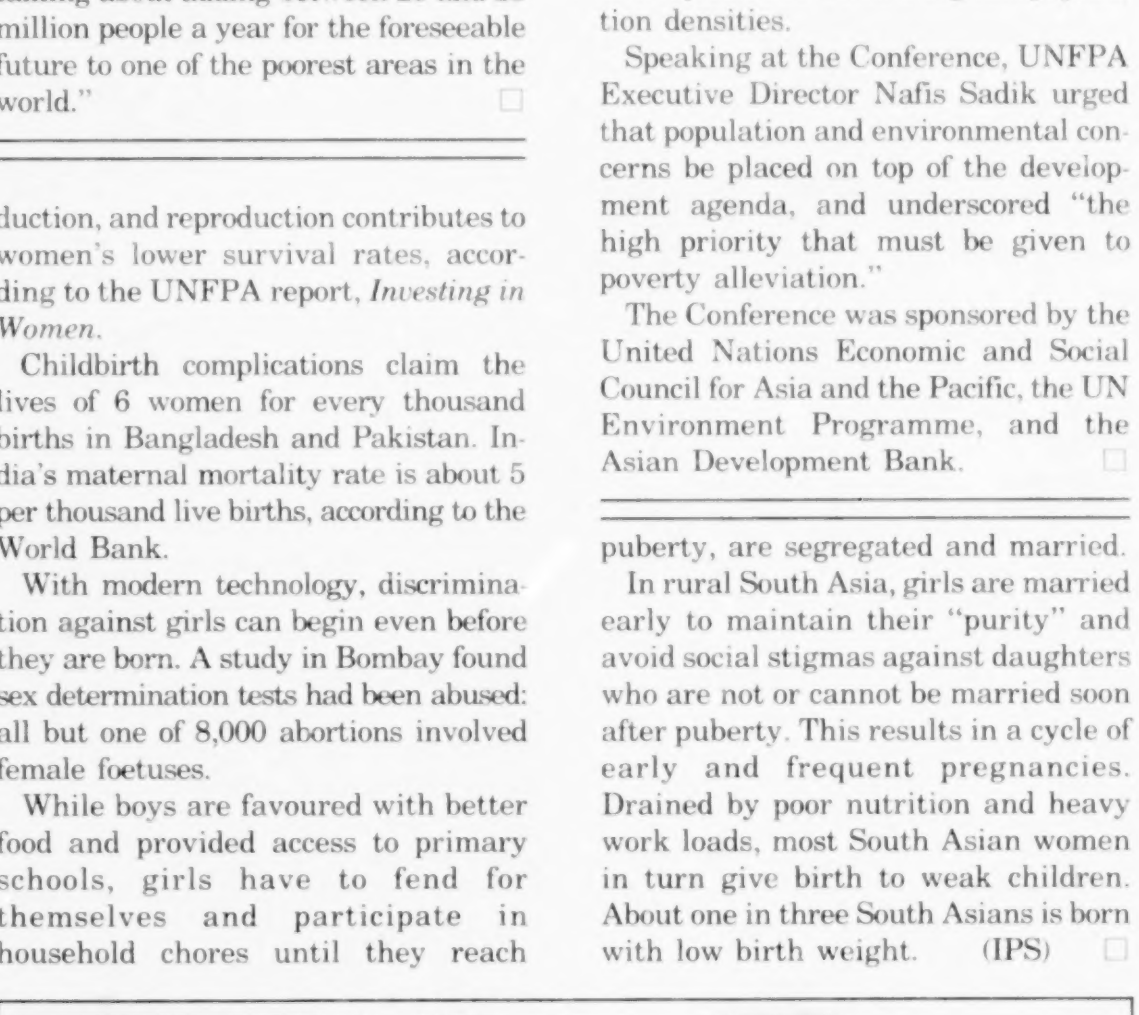
The triple burden of largely unrecognized domestic work, production, and reproduction contributes to women's lower survival rates, according to the UNFPA report, *Investing in Women*.

Childbirth complications claim the lives of 6 women for every thousand births in Bangladesh and Pakistan. India's maternal mortality rate is about 5 per thousand live births, according to the World Bank.

With modern technology, discrimination against girls can begin even before they are born. A study in Bombay found sex determination tests had been abused: all but one of 8,000 abortions involved female foetuses.

While boys are favoured with better food and provided access to primary schools, girls have to fend for themselves and participate in household chores until they reach puberty, are segregated and married.

In rural South Asia, girls are married early to maintain their "purity" and avoid social stigmas against daughters who are not or cannot be married soon after puberty. This results in a cycle of early and frequent pregnancies. Drained by poor nutrition and heavy work loads, most South Asian women in turn give birth to weak children. About one in three South Asians is born with low birth weight. (IPS) □



UN/John Isaac

Girls being taught at a community centre in Karachi, Pakistan. As the Year of the Girl Child draws to a close, South Asia's little girls remain heavily disadvantaged at home, school, farm, and work place.

IUD's life extended

THE UNITED STATES Food and Drug Administration (FDA) has approved extension of the duration of effectiveness claim of the Copper T 380A IUD (intra-uterine device) from four to six years. The extension, effective wherever the Copper T 380A is used, follows a World Health Organization study submitted to the FDA by the Population Council, which developed the device. Some 11 million of these copper-bearing IUDs have reportedly been distributed in more than 70 countries. For more information, contact Sandra Waldman at the Population Council, One Dag Hammarskjold Plaza, New York, NY 10017. Telephone (212) 644-1692. □

South Commission encourages immediate action on population

"WE ARE GREATLY concerned that the population in many countries of the South is growing at an explosive and, in the long run, unsustainable pace," write the members of the South Commission in their report, *The Challenge to the South*.

"In the long run the problem of overpopulation of the countries of the South can be fully resolved only through their development," they add. "But action to contain the rise of population cannot be postponed. The present trends in population, if not moderated, have frightening implications for the ability of the South to meet the twin challenges of development and environmental security in the twenty-first century."

The report, released in August in Caracas, Venezuela, is the product of three years' work by a team of 28 prominent international development experts led by former Tanzanian President Julius Nyerere. The document is envisioned as a development handbook for the countries of the South. It analyses North-South relations, technology transfer and the creation of new technologies, financial institutions, environmental protection, disarmament, and drug trafficking.

The authors propose an immediate six-point action plan:

- enacting measures to halt the net transfer of resources from the South to the North, and reducing external debt, in order to make possible economic growth of at least 2-3 per cent per year;
- cementing multilateral agreements to protect the environment and promote sustainable development;
- doubling concessional resource transfers to the South by 1995;
- establishing independent international mechanisms to assess developing countries' needs;
- drawing up a timetable for eliminating protectionist barriers to the South's exports; and
- protecting developing countries from volatile interest and exchange rates as well as terms of trade.

The report stresses immediate action on population: "It takes time before even well-designed policies can have a material impact on the birth rate. It is therefore necessary that countries with high birth rates should act without delay and adopt policies which will have an impact on population growth in a reasonable period of time."

"We are conscious that we are dealing with issues that touch on some of the deepest human emotions," the authors add. "The pronatal sentiment has strong roots in most traditional societies. Willing acceptance of the small-family norm therefore necessitates the active involvement and support of local communities and responsible guidance and encouragement from civic and religious leaders."

The Report of the South Commission, The Challenge to the South, *is available as a paperback from Oxford University Press.* □

ALFRED SAUVY

Alfred Sauvy, founder of France's National Institute for Demographic Studies (INED) and the first director of the United Nations Population Commission, died on 30 October in a Paris hospital.

In a career spanning seven decades, the 92-year-old French demographer authored more than 40 books. One of them, "The Rise of Youth," published in 1959, predicted the 1968 student riots in Paris. In 1961, Sauvy's "Fertility and Survival" warned that the world could only save itself from apocalypse by dramatically increasing global food production or by reining in population growth.

A professor at the College de France, Sauvy served as France's Secretary of State for the Family in 1946-47.

Sauvy suffered a stroke in April. In June, his daughter Anne accepted on his behalf the 1990 United Nations Population Award. □

NEWS IN BRIEF

THE FINNISH Population and Family Welfare Federation, Väestöliitto, is marking its 50th anniversary in 1991 by organizing the "International Population Conference 1991; Revival of Aging Societies." The Conference is scheduled to take place in Espoo, Finland, on 20-22 May, and will address the consequences of population development in the industrialized countries. It is being cosponsored by the Finnish Ministry of Education, Central Statistical Office, and the Finnish Demographic Society, as well as the following international entities: the European Association for Population Studies, European Society for Population Economics, International Planned Parenthood Federation, International Union of Family Organizations, International Union for the Scientific Study of Population, and UNFPA. For more information, contact: Mr. Jouko Hulkko, Managing Director, The Finnish Population and Family Welfare Federation, Kalevankatu 16, 00100 Helsinki, Finland. □

THE SEVENTH module in the joint World Health Organization-UNFPA series, "Aspects of Sexuality and Family Planning" is now available. Entitled *Guidelines on Diagnosis and Treatment of Infertility*, it contains four chapters: Definition, Etiology, Testing, and Treatment. For more information, contact: SFP Unit, WHO Regional Office for Europe, 8 Scherfigsvej, 2100 Copenhagen, Denmark. □

THE BOW GROUP, a Conservative party think tank in Britain, has issued a report calling on governments in industrialized countries to increase financial support to population control programmes. *Less People, Less Pollution* urges the British government to increase its support of population programmes by five hundred per cent by century's end. The report states that since the end of World War II, global population has doubled from about 2.4 billion to around 5 billion. "At local, national, international, and global levels the evidence is that population growth goes hand in hand with increased pollution and environmental decay," says Richard Ottaway, the report's author. He suggests that better population programmes will help counter global pollution better than economic aid, and will cost less. The report is available from Bow Group publications, London. □

THE 1990-91 EDITION of the *Directory of Training Courses in Family Planning and Maternal and Child Health* published by UNFPA compiles information about short-term training courses in these fields being offered by organizations around the world. The *Directory* was produced with technical support from the Margaret Sanger Center of Planned Parenthood of New York City. It has been distributed to United Nations agencies, governmental and other organizations, and other institutions worldwide, in a bid to reach placement authorities and prospective trainees. Copies are also available from: UNFPA, Maternal and Child Health/Family Planning Branch, Technical and Evaluation Division, 220 East 42nd Street, New York, NY 10017, USA. Telephone: (212) 297-5225. □

THE SCHOOL FOR Applied Statistics and Data Processing Technology of the United States Bureau of the Census in Washington, D.C. will be holding a number of Spanish-language courses during 1991. These include a workshop on data dissemination (25 February-26 April) and modular courses in Economic Statistics, Population Censuses and Surveys, and Computer Data Systems (28 April-13 December). The School does not offer any financial assistance to participants. For more information, contact: Preston (Tim) Brown, ISPC/ESAYTEC, Bureau of the Census, Washington, D.C. 20233. Telephone: (301) 763-4830. Fax: (301) 763-7589. □

THE SCOTTISH HEALTH Education Group is producing a series of video training packs for health-care and other professionals involved in HIV/AIDS counselling. Titles include: "Living with AIDS," "Time for Talking," "HIV and AIDS—Counselling for the General Practitioner," and "Sharing Counselling Skills." For more information, contact: Scottish Health Education Group, Health Education Centre, Woodburn House, Canaan Lane, Edinburgh EH10 4SG, UK. □

Data base offers lessons learned by UNFPA

THE UNFPA EVALUATION Branch provides a Lessons Learned Data Base that responds to queries from inside and outside the Fund on key population issues.

Set up in 1988, the data base contains more than a thousand identifiable lessons culled from sectoral evaluations, country reviews, and other UNFPA reports. The lessons have been chosen for their applicability to various circumstances, and are continually updated at UNFPA headquarters in New York.

Lessons are classified according to specific issues such as the design of projects or programmes, the management of population activities, specific research findings on important subjects, and evaluation reports on topics such as women in development and technical cooperation among developing countries. They are also divided according to the usual UNFPA work plan categories: maternal and child health and family planning; information, education, and communication; population data analysis; and population dynamics. It is possible to search the data base by region as well as country.

Individuals interested in a specific topic can contact the Evaluation Branch for a search. UNFPA staff members can access the data base through the local area network.

Since it may be cumbersome to access the data base directly to get at individual lessons learned, the Evaluation Branch has done special subject searches for interested clients. Examples of such searches include: women, population and development; effects and impact of institution-building efforts; financial management of projects in Africa; the effectiveness of agency regional advisers; and an evaluation of agency execution. Some of these special searches have been issued in the Evaluation Branch newsletter.

For more information, contact: Evaluation Branch, Technical and Evaluation Division, UNFPA, 220 East 42nd St., New York, NY 10017, USA. Telephone: (212) 297-5213. □

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Editor-in-Chief: Jyoti Shankar Singh
Editor: Alex Marshall

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Information and External
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United Nations Population Fund
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